



## Request for Public Record In-Car Video Request Form

Attorney Requesting Video: \_\_\_\_\_  
Print Name

Signature: I certify I represent the below listed defendant

Attorney bar Number \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

Law Firm (If applicable): \_\_\_\_\_

**All videos are charged a \$30.00  
reproduction fee.**

The following information is required to ensure the proper video is accessed/reproduced:

Arresting Officer: \_\_\_\_\_ Case #: \_\_\_\_\_

Date/Time of Arrest: \_\_\_\_\_

Arrestee's Name: \_\_\_\_\_ Race/Sex: \_\_\_\_\_/\_\_\_\_\_

Location of Arrest: \_\_\_\_\_

Type of Incident or Charges: \_\_\_\_\_

Court Date: \_\_\_\_\_

### (Solicitor's Use Only)

Approved ☐

Denied ☐

Approved By: \_\_\_\_\_

Print Name/Title \_\_\_\_\_

Signature/Date \_\_\_\_\_